



RETURN FORM (add to the product in the shippingbox)

INFORMATION

Name + surname: _____

Street: _____ Number: _____

ZIP code + Town: _____

Ordernumber: _____

Description:

*You are not obliged to describe a reason for your return. By giving for your return you can help us improve our business.
PAY ATTENTION! Only products that meet our return policy will be accepted.*

I would like a return of my money.

I would like to receive a new product.

Signature: _____

Date: _____



SENDER:

Name:.....

Ordernumber:

The Audio Specialists Retail retour
Stadhoudersmolenweg 196
7317AZ Apeldoorn
The Netherlands

This space is for the bar code that you get at the post office.
Return costs are for your own account. **PAY ATTENTION!** Keep the shipping receipt.